



THE UNIVERSITY OF QUEENSLAND

A U S T R A L I A

The University of Queensland
Centre for Health Innovation and Solutions

Medeserv Pty Ltd

Public Report

Prevocational Education Catalogue

Presented to

Department of Health and Ageing

December 20, 2009



Table of Contents

ABSTRACT	3
EXECUTIVE SUMMARY	3
AIMS OF THE PROJECT	4
KEY ACTIVITIES	4
CHALLENGES	7
RECOMMENDATIONS	7
NATIONAL STOCKTAKE STRATEGY	9
KEY OBSERVATIONS	9
STOCKTAKE RESULTS	10
ORGANISATIONS' CONTRIBUTIONS	10
RESOURCES AGAINST THE AUSTRALIAN CURRICULUM FRAMEWORK FOR JUNIOR DOCTORS (ACFJD)	10
SUITABILITY OF COURSEWARE	11
FEE FOR USE	12
BARRIERS TO SHARING EDUCATIONAL RESOURCES	13
CONCLUSIONS / RECOMMENDATIONS	14
APPENDICES	

ABSTRACT

The approach to education of junior doctors has tended to vary across jurisdictions. Education assets, in the form of

- fully-developed programmes,
- electronic and physical tools and educational resources and
- train-the-trainer programmes

have been developed by different jurisdictions – even by individual education officers.

Whilst the time and expense spent developing high quality education programmes can be justified by jurisdictional differences, the challenge increasingly is to identify how an educational asset developed by someone else can be used in a specific jurisdiction. Duplication of generic educational assets is wasteful of resources in a climate where funding and personnel are scarce.

With the publication of the Australian Curriculum Framework for Junior Doctors (ACFJD), the ability to catalogue each education asset with respect to a national framework has now become possible. The development of a consistent way of cataloguing assets and making that catalogue available now provides a mechanic for individual educators and jurisdictions to make decisions about developing, versus licensing, of education assets.

EXECUTIVE SUMMARY

The University of Queensland undertook this project under funding by the Department of Health and Ageing (DoHA) through the Medical Training Review Panel (MTRP).

The outcomes of this project included the coming to an agreement of a national standard for the cataloguing of education assets, the undertaking of a national stocktake of current assets, and the provision of a searchable catalogue. These deliverables are fundamental on a national level to the efficiency and effectiveness of resource utilisation for training for junior doctors.

The University of Queensland engaged with relevant stakeholders to agree the national standard for cataloguing education assets. As part of the overall National Steering Committee of the ACFJD project, CPMEC established a Curriculum Development and Learning Resources Working Party (CDLRWP) which began its core work in 2008 and 2009. One of the objectives of the Curriculum Development and Learning Resources Committee was to vet resources that claim to be consistent with the ACFJD. The result of this project, i.e. the creation of an ACFJD Resources Catalogue was consistent with this objective and CPMEC has therefore become the vehicle for promoting the asset to stakeholders.

The catalogue has been promoted as a useful educational asset to potential users and stakeholders. The catalogue is available online and electronically to relevant end users through the CPMEC website (www.cpmecc.org.au). The teaching and learning resources referenced on the catalogue continues to grow, and includes online courseware, e-learning objects and student kits. To access the catalogue directly, visit acfjd.cpmecc.org.au.

AIMS OF THE PROJECT

The aim of this project was to:

- develop and gain agreement from the CPMEC and relevant stakeholders on a consistent national standard for the categorisation of educational assets
- undertake a stocktake of current educational resources/assets that are consistent with the Australian Curriculum Framework for Junior Doctors (ACFJD)
- develop a searchable online catalogue of current resources/assets
- develop a sustainable model for the maintenance and updating of the catalogue.

In achieving the aim the University of Queensland liaised with the CPMEC Curriculum Development and Learning Resource Committee to ensure that resources were consistent with the ACFJD. UQ also consulted with the CPMEC, state medical education councils and relevant stakeholders to develop a set of standards for minimum requirements to be used in the catalogue.

KEY ACTIVITIES

The University of Queensland (UQ) has actively participated in ongoing collaboration with the CPMEC Curriculum Development and Learning Resource Working Party (CDLRWP) to develop a standard for categorizing educational assets suitable for prevocational doctors. To achieve this aim, the following activities were undertaken:

Phase I: Detailed Project Plan and scoping

- The National Project Coordinator (NPC) for the ACFJD National Project, met with UQ to determine the CDLWP tasks that were relevant to the catalogue project. A discussion paper was formed for consideration by the CDLWP. The discussion paper outlined the purpose of reviewing assets, and various methodologies that could be employed to review assets within the catalogue.

The group discussed that:

- There should be a quality barrier for assets being submitted to the catalogue
- Reviewing assets will increase their credibility for being legitimate education tools, and provides a level of reassurance to educators and junior doctors
- The review of resources could be achieved by using the catalogue entry as a filter (including how it maps to the ACFJD, learning objectives, correct target audience)
- Additional data entry would provide information about the evidence base, evaluation of the resource, education experience or qualifications of those creating the resource
- A further level of review could include: self assessment against standards (input by education providers), a user rating system (input by users), the placement of a review or editorial panel, an accreditation process for providers inputting resources or requesting evaluation data from providers.

Final Report – December 20, 2009
**Department of Health and Ageing – Stock-take and Online Catalogue of Courseware Mapping
to Australian Curriculum Framework for Junior Doctors**

- Alternatively, all resources are accepted and users self-determine their use based on information about the resource against a given criteria.
- Upon review of the discussion paper, the group agreed that:
 - Resources need to be reliable but usable by junior doctors in the workplace and that by developing a review process there is a need to ensure that it is not so rigorous that useful resources are precluded from inclusion in the catalogue because they don't meet a "gold standard".
 - Due to resourcing restrictions, the quality of catalogue entries would be managed by using the entry process as a filter, and that users would self-determine their use
 - Annually, education providers should be reminded to update information about their resource to maintain currency.
- Upon agreeing this scope a detailed project plan was developed by the University of Queensland project manager.
- Following a scoping literature review, a draft set of metadata fields were created for comment. The draft metadata standard was circulated to members of the CDLRWP prior to the national workshop that took place in Sydney in March 2008.
- A prototype of the catalogue containing the draft metadata fields was presented at the National Project Meeting in Sydney in March, 2008 and tested with the stakeholder groups. Following this face to face meeting, the metadata fields were agreed and established.

UQ and CPMEC with the CDLWP agreed on a metadata standard which would be used by education providers to submit their assets during the National Stocktake.

Phase II: Software development

- The development of the software for the catalogue was commissioned following agreement of the metadata standards and review of the user interface prototype.

The key steps included:

- Commissioning a database architect and software development team
- Completing systems requirements
- Completing architectural design
- Completing software development and testing
- Deployment to a www site. The site was linked to the CPMEC website, or can be directly accessed through <https://acfjd.cpmecc.org.au>

The education catalogue was deployed, which contained a metadata standard for education providers to map their education assets against the current ACFJD curriculum, which in turn allows the database to be searchable by fields within the ACFJD.

Phase III: National Stockake

National Stocktake

- The national stocktake was launched on September 1, 2008 and ran to December 31, 2008.
- The strategy to promote participation in the national stocktake is represented in table 1.

Table 1: Strategy for promoting participation in the national stocktake:

Group contacted	Strategy
Umbrella Organisations: Post graduate medical councils Colleges Universities that teach medicine	Umbrella organizations were contacted and asked to send a pre-prepared brief / flyer to their contacts / member constituency promoting the stocktake and advertising the stocktake address. Subsequent requests were sent to these organizations to seek their participation / cooperation.
Individual Organisations: Medical organizations Healthcare agencies Consumer / Diseases organizations Division of GPs Medical Boards Other groups	Individual organizations were contacted and asked to contribute any resources into the national stocktake.

Responses

- The initial National Stocktake process returned a result of 92 resources. These were input to the stocktake by organisations such as:
 - Australian College of Rural and Remote Medicine
 - BloodSafe e-Learning
 - Kidney Health Australia
 - Multiple Sclerosis Society of Queensland
 - National Prescribing Service
 - Postgraduate Medical Council of Victoria
 - PrimEd
 - Royal Australian College of Surgeons
 - University of Queensland Health Insitu
 - Women and Children’s Hospital
- A full stocktake report outlining the key observations is available in appendix The stocktake report draws conclusions on the process undertaken and results obtained.
- Note that resources can still be input / updated by education providers as a part of the ongoing function of the catalogue.

Barriers Survey

Final Report – December 20, 2009
**Department of Health and Ageing – Stock-take and Online Catalogue of Courseware Mapping
to Australian Curriculum Framework for Junior Doctors**

- In September, 2008, the National ACF project, under the auspices of CPMEC administered a national survey which explored the barriers that prevent education providers from sharing their educational resources. A paper was presented at the National Prevocational Education Forum in Hobart in November. Results from this survey were considered by UQ and the reference panel in reviewing the results of the national stocktake, and comments included in the stocktake report in appendix 1.

The National Stocktake period has concluded, however relevant resources can continue to be entered into the catalogue by education providers

The stocktake and search screens are available online at acfjd.cpmecc.org.au and promoted on the CPMEC website.

The results of the National Stocktake have been shared with the CPMEC Curriculum Development and Learning Resource Committee

The Catalogue can now be promoted as a useful asset to potential users and stakeholders

Users of the catalogue are able to request access to resources, such as online courseware, e-learning objects, ready-to-use curricula, train the trainer guides and student kits, by following access instructions that are available within the catalogue.

CHALLENGES

The key challenges for the ongoing support of the online catalogue include the following:

- Input to the catalogue was made by a small number of education providers
- Resourcing of ongoing management of assets within the education catalogue needs to be further considered
- Unless the barriers to sharing resources are addressed, there will likely be a reluctance by education providers to share educational resources.

RECOMMENDATIONS

As reported in the national stocktake report (appendix 1), the contribution to the national stocktake was made by a small number of stakeholders. There are a couple of possibilities that might explain this:

1. there is only a limited number of educational resources available that meet the quality standards of the catalogue; or
2. there are more resources available, however there is a reluctance for providers to share or promote these resources within the wider community.

As a part of this report's recommendations;

Final Report – December 20, 2009
**Department of Health and Ageing – Stock-take and Online Catalogue of Courseware Mapping
to Australian Curriculum Framework for Junior Doctors**

1. we would recommend that funding is made available to education providers seeking to develop quality, evidence based education in areas of the ACFJD that have limited resources
2. we would recommend that more work is completed to understand the barriers to sharing and promoting resources, with the view to forming strategies to remove or reduce these barriers.

APPENDIX 1: REPORT ON NATIONAL STOCK TAKE OUTCOME

National Stocktake of Education Resources for Junior Doctors

The stocktake of educational resources for prevocational doctors (post graduate year 1 and 2) was designed to identify the resources for use by prevocational doctors (post graduate year 1 and 2) as well as identify gaps in resources requiring development and funding.

The national stocktake took place between September and December in 2008, and was managed through the implementation of an online catalogue system deployed on the CPMEC website. The catalogue is searchable and available at <https://acfid.cpmecc.org.au>

NATIONAL STOCKTAKE STRATEGY

The national stocktake was launched on September 1, 2008 and ran to December 31, 2008.

The strategy to promote participation in the national stocktake is represented below.

Table 1: Strategy for promoting participation in the national stocktake:

Group contacted	Strategy
Umbrella Organisations: Post graduate medical councils Colleges Universities that teach medicine	Umbrella organizations were contacted and asked to send a pre-prepared brief / flyer to their contacts / member constituency promoting the stocktake and advertising the stocktake address. Subsequent requests have been sent to these organizations to seek their participation / cooperation.
Individual Organisations: Medical organizations Healthcare agencies Consumer / Diseases organizations Division of GPs Medical Boards Other groups	Individual organizations were contacted and asked to contribute any resources into the national stocktake.

Contributors were directed to the online catalogue to input metadata describing resources. In addition to input fields, a search function allows users to search the catalogue either by fields within the ACFJD curriculum, keyword or advanced search.

KEY OBSERVATIONS

The results of the national stocktake resulted in the following key observations:

1. The majority of contributions to the stocktake were made by 2 organisations. There were no submissions made by Australian State health agencies.
2. There was a distribution of resources covering most areas of the ACFJD curriculum categories. Categories that did not have any resources submitted against them were:
 - a. Infection control (under *Safe Patient Care*)
 - b. Radiation safety (under *Safe Patient Care*)
 - c. Basic life support (under *Emergencies*)
 - d. Advanced life support (under *Emergencies*)
 - e. Complaints (under *Patient Interaction*)
3. Although 78% of resources were suitable for junior doctors, only 5% of the resources were designed specifically for use by junior doctors.

APPENDIX 1: REPORT ON NATIONAL STOCK TAKE OUTCOME

4. 13% of educational resources submitted were free to access. The remaining resources required a fee, or users were asked to contact the provider for information on access.

STOCKTAKE RESULTS

Organisations' Contributions

The stocktake returned a result of 92 educational resources that met the quality criteria for junior doctor education, under the Australian Curriculum Framework for Junior Doctors. Table 2 below outlines a summary of contributions made by organisations within Australia.

Table 2: Summary of organizations inputting resources and number of resources for each organisation

Organisation Name	Number of Educational Resources Submitted
The Australian College of Rural and Remote Medicine (ACRRM)	34
BloodSafe e-Learning	1
Kidney Health Australia	2
Multiple Sclerosis Society of Qld	1
National Prescribing Service	1
Postgraduate Medical Council of Victoria	1
PRIMED	9
The Royal Australian College of Surgeons (RACS)	5
UQ Health Insitu	35
Women's & Children's Hospital	3
Total entries:	92

The majority of contributions were made by two organisations; the Australian College of Rural and Remote Medicine (ACRRM) and the University of Queensland's UQ Health Insitu.

Resources against the Australian Curriculum Framework for Junior Doctors (ACFJD)

The resources submitted to the catalogue covered a broad range of competencies, resulting in a distribution of resources across nearly all curriculum categories. Of the 63 curriculum categories, 4 categories had no resources submitted against them.

Table 3 below outlines each of the curriculum categories, and the number of resources that had competencies appropriate for each category.

Table 3: Number of resources accessible under each curriculum category

Clinical Management				
Safe Patient Care	Systems	25	Infection control	0
	Risk and prevention	22	Radiation safety	0
	Adverse events and near misses	3	Medication safety	2
	Public health	6		

APPENDIX 1: REPORT ON NATIONAL STOCK TAKE OUTCOME

Patient Assessment	Patient identification	8	Investigations	34
	History and examination	37	Referral and consultation	22
	Problem formulation	34		
Emergencies	Assessment	4	Advanced life support	0
	Prioritisation	1	Acute patient transfer	1
	Basic Life Support	0		
Patient management	Management options	35	Subacute care	2
	Therapeutics	35	Ambulatory & community care	2
	Pain management	2	Discharge planning	1
	Fluid and electrolyte management	1		
Skills and procedures	Decision-making	22	Procedures	20
	Informed consent	2	Post-procedure	8
	Preparation & anaesthesia	5		
Communication				
Patient Interaction	Context	21	Breaking bad news	2
	Respect	18	Open disclosure	2
	Providing information	22	Complaints	0
	Meetings with families or carers	11		
Managing Information	Written	12	Health records	12
	Electronic	11	Evidence-based practice	8
	Prescribing	5	Handover	1
Working in teams	Team structure	1	Teams in action	6
	Team dynamics	1	Case presentation	8
Professionalism				
Doctor and Society	Access to healthcare	12	Medicine & the law	1
	Culture, society & healthcare	6	Health promotion	16
	Indigenous patients	1	Healthcare resources	16
	Professional standards	2		
Professional Behaviour	Professional responsibility	6	Ethical practice	3
	Time management	2	Practitioner in difficulty	1
	Personal well-being	2	Doctors as leaders	2
Teaching & Learning	Self-directed learning	2	Supervision	1
	teaching	1	Career development	1

Suitability of courseware

Education providers submitting educational resources to the stocktake were asked to comment on the suitability of the course or kit for junior doctors. 5% reported that the resource was 'designed specifically for the use of junior doctors'. 73% stated that the courseware was 'suitable', and 21% reported that the courseware was 'of relevance' to junior doctors.

APPENDIX 1: REPORT ON NATIONAL STOCK TAKE OUTCOME

Suitability of Courseware for Junior Doctors

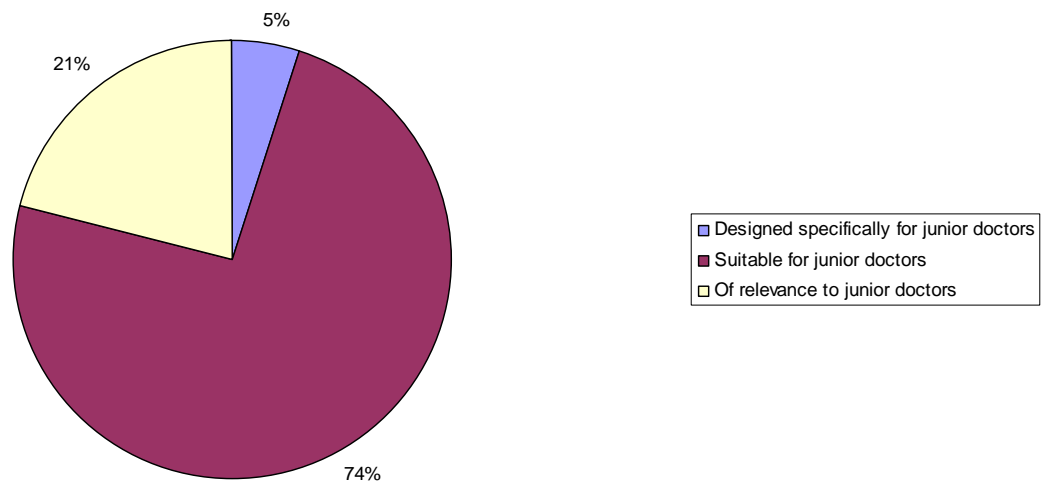


Fig 1: Suitability of courseware for junior doctors

In summary, a low proportion of the courseware was deemed to have been designed specifically for junior doctors, but the majority of courseware was reported to be suitable.

Fee for use

Education providers were asked to catalogue whether a fee would be required to access the education, by either junior doctors or education trainers. 13% of courses were available free of charge to users. The remaining 87% noted that either a licence fee applied, the item was available for purchase, or users were to contact the education provider for information regarding access to the course.

APPENDIX 1: REPORT ON NATIONAL STOCK TAKE OUTCOME

Fees for Accessing Educational Resources

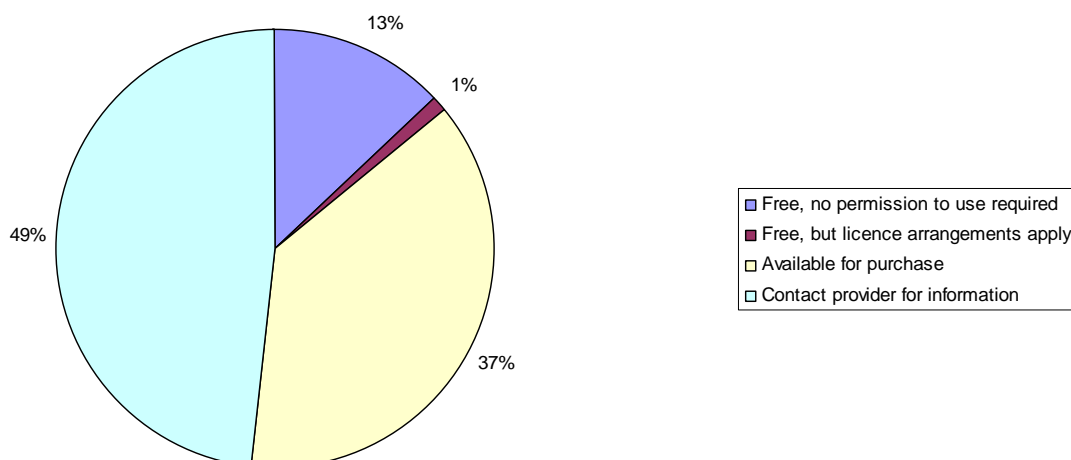


Fig 2: Fees applicable for accessing the educational resources

BARRIERS TO SHARING EDUCATIONAL RESOURCES

In September, 2008, the National ACF project, under the auspices of CPMEC administered a national survey which explored the barriers that prevent education providers from sharing their educational resources. A paper was presented at the National Prevocational Education Forum in Hobart in November.

The key observations from this paper was that there were a number of barriers preventing providers from sharing their resources with others. Some highlighted barriers included:

- Intellectual property – lack of recognition of self / organisation
- Intellectual property – potential to be disadvantaged financially
- Intellectual property – would affect ability to publish material
- Inability to recoup cost of development of the resource
- Quality issue – resource not fully developed
- Loss of competitive advantage in terms of recruiting junior medical officers (JMOs)
- Format of resource not easily transferrable, i.e. developed with a local IT platform
- Time and personal effort invested in the development of resource not recognised
- Potential for others to alter the resource in a manner which affects its quality and therefore reflects badly on the author
- Potential for others to gain financially by adapting the resource and using / selling it
- Concern about whether the content would be acceptable to others
- Concern that the resource will be openly criticised by others
- Resource too site specific – so limited relevance outside the place in which it was developed

APPENDIX 1: REPORT ON NATIONAL STOCK TAKE OUTCOME

This survey, undertaken as a part of the National ACF project, provides some insights into the reasons why providers may be unwilling to share or promote their educational resources with others.

CONCLUSIONS / RECOMMENDATIONS

As discussed, the contribution to the national stocktake was made by a small number of stakeholders. There are a couple of possibilities that might explain this:

- there is only a limited number of educational resources available that meet the quality standards of the catalogue; or
- there are more resources available, however there is a reluctance for providers to share or promote these resources within the wider community.

As a part of this report's recommendations;

1. we would recommend that funding is made available to education providers seeking to develop quality, evidence based education in areas of the ACFJD that have limited resources
2. we would recommend that more work is completed to understand the barriers to sharing and promoting resources, with the view to forming strategies to remove or reduce these barriers.



Project Management Plan

Prevocational Education Catalogue

Department of Health and Ageing

Project Id: DoHA1237; Proposal Id: 2007 060

January 25, 2008

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Project Manager,
Med-E-Serv Pty. Ltd.

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Commercial-in-Confidence

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APPENDIX 2: PROJECT PLAN

Prevocational Education Catalogue

Version Control

Version Number	Revision Date	Revision Description	Sections affected	Changes By
V0.2	25/01/2008	Draft revised	All	Tam Hennessy

Table of Contents

APPENDIX 2: PROJECT PLAN

INTRODUCTION

In December 2006, the Department of Health and Aging advertised a tender to individuals or organizations to undertake projects that will improve the education and training of pre-vocational doctors. Organisations could apply for project funding if the projects aimed to achieve one or more of the following objectives:

- facilitating the transition between undergraduate and postgraduate medical education and training by supporting the development and implementation of a National Curriculum Framework for junior doctors
- supporting increased numbers of medical school graduates
- contributing to the development of a National Accreditation Framework for prevocational trainees
- supporting the professional development of registrars
- ensuring safety and quality training in health care
- developing and integrating postgraduate vocational training across the medical education and training continuum
- developing strategies for the assessment, upskilling and support of international medical graduates in the Australian health care system
- improving feedback and appraisal skills for junior doctors
- developing innovative projects and practices to support the education and training of prevocational doctors.

The University of Queensland (UQ) submitted 3 tenders, including a tender to provide assessment and performance appraisal training for clinical supervisors, an evidence based approach to patient safety and a national stocktake and courseware mapping to the Australian Curriculum Framework for Junior Doctors (ACFJD), held by the Confederation of Postgraduate Medical Councils (CPMEC). UQ successfully won tender to complete the national stocktake of courseware. Funding for this project is being managed by the Medical Training Review Panel (MTRP) on behalf of DoHA. UQ have subcontracted the completion of this project to Medeserv.

CPMEC are also undertaking a project to vet post-graduate year 1 and 2 (PGY1/2) education courses to assess for quality, and to map these to the ACFJD. UQ/Medeserv will collaborate with CPMEC and relevant stakeholders to gain agreement of a consistent national standard for the categorization of educational assets, to undertake a stocktake of current educational resources/assets that are consistent with the ACFJD, develop a searchable online catalogue of current resources/assets and develop a sustainable model for the maintenance and updating of the catalogue.

Medeserv will liaise with the CPMEC Curriculum Development and Learning Resource Committee (CDLRC) to ensure that resources are consistent with the ACFJD. Medeserv will also consult with the CPMEC state medical education councils and relevant stakeholders to develop a set of standards for minimum requirements to be used in the catalogue. The catalogue will be promoted online, and the teaching and learning resources, online courseware, e-learning objects, ready-to-use curricula, train the trainer guides and student kits that are referenced on the catalogue will be made available to users.

APPENDIX 2: PROJECT PLAN

The project period is from the date of signing the agreement to 30 June, 2009.

The Client

The Department of Health and Ageing

Project scoping statement

The scope of this project is to create an online catalogue, defined by a minimum metadata set, which CPMEC can advertise to educational providers to enter their education programmes so that CPMEC can complete an audit process of educational programmes for post-graduate years 1 and 2 junior doctors. The scope includes assisting CPMEC in defining a metadata set, capturing the content, and allowing content to become accessible as a searchable database once vetting of each education programme is complete

Aim of the Project

The aim of this project is to develop and gain agreement from the CPMEC and relevant stakeholders on a consistent national standard for the categorisation of educational assets, to undertake a stock take of current educational resources/assets that are consistent with the Australian Curriculum Framework for Junior Doctors (ACFJD), develop a searchable online catalogue of current resources/assets and to develop a sustainable model for the maintenance and updating of the catalogue.

In achieving the aim the Participant will liaise with the CPMEC Curriculum Development and Learning Resource Committee to ensure that resources are consistent with the ACFJD. The Participant will consult with the CPMEC, state medical education councils and relevant stakeholders to develop a set of standards for minimum requirements to be used in the catalogue.

The catalogue will be promoted as a useful educational asset to potential users and stakeholders. The catalogue will be prepared to the satisfaction of the Department and the CPMEC and will be made available online and electronically to relevant end users. The teaching and learning resources, including online courseware, e-learning objects, ready-to-use curricula, train-the-trainer guides and student kits, that are referenced on the catalogue will also be made available to the relevant end users.

Start and Complete Date

Project Start Date:

May 2008

Project Complete Date:

30/06/2009

APPENDIX 2: PROJECT PLAN

Key Stakeholders

Position / Company	Stakeholder Name	Influence
CPMEC	Dr Jag Singh, National Manager Debbie Paltridge, National Project Coordinator	National Manager of CPMEC Debbie coordinates CDLWRP working party and coordinates national project
National Steering Group – National Project	Various members	Kept informed by Debbie Paltridge
CDLRWP – Curriculum Development Learning Resources Working Party	Prof Barry McGrath (Acting Chair) Prof Brian Jolly A/Prof Simon Wilcox A/Prof Fiona Lake Prof Lynn Robinson Dr David Chapman Dr David Thomas Dr Narelle Shadbolt A/Prof Brendan Flanagan A/Prof Jill Gordon Prof Rakesh Kumar Dr Dayna Law Ms Liz Ware Ms Toni Vial Dr Ian Graham Ms Claire Wise Dr Felicity Hodder	Key contact group for developing metadata list and stocktake process

APPENDIX 2: PROJECT PLAN

PROJECT OUTLINE

Client: DoHA
 Project: DoHA 1237
 Directory: N:\DOHA\1237 Prevocational Education Catalogue\110 Project Plan
 SaveDate: 08 Nov 2007

START		0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45										
Update 1st week # in START col		08-001	08-002	08-003	08-004	08-005	08-006	08-007	08-008	08-009	08-010	08-011	08-012	08-013	08-014	08-015	08-016	08-017	08-018	08-019	08-020	08-021	08-022	08-023	08-024	08-025	08-026	08-027	08-028	08-029	08-030	08-031	08-032	08-033	08-034	08-035	08-036	08-037	08-038	08-039	08-040	08-041	08-042	08-043	08-044	08-045	08-046										
Week ending		6-Jan	13-Jan	20-Jan	27-Jan	3-Feb	10-Feb	17-Feb	24-Feb	2-Mar	9-Mar	16-Mar	23-Mar	30-Mar	6-Apr	13-Apr	20-Apr	27-Apr	4-May	11-May	18-May	25-May	1-Jun	8-Jun	15-Jun	22-Jun	29-Jun	6-Jul	13-Jul	20-Jul	27-Jul	3-Aug	10-Aug	17-Aug	24-Aug	31-Aug	7-Sep	14-Sep	21-Sep	28-Sep	5-Oct	12-Oct	19-Oct	26-Oct	2-Nov	9-Nov	16-Nov	23-Nov									
Who																																																									
Finish																																																									
DoHA 1237																																																									
Prevocational Education Catalogue																																																									
Phase 1: Scope and Requirements	Project Plan																																																								
	Literature survey, compile metadata standards																																																								
	Collaboration on metadata standards with stakeholders																																																								
	Collaboration on system requirements with stakeholders																																																								
Phase 2: Database Development	Develop catalogue screens prototype																																																								
	Commission database architect																																																								
	Panel Meeting - Review catalogue screens prototype																																																								
	Complete systems requirements																																																								
	Complete architectural design																																																								
	Commission software development																																																								
	Complete software development																																																								
	Deployment into www site																																																								
Phase 3: Initial Stocktake Process	Initial submission of interest process - create database of interested parties																																																								
	Sign process for calling for submissions																																																								
	Advertise for a call for submissions in agreement with the reference panel																																																								
	Initial stocktake call (12 weeks)																																																								
Phase 4: Review Stocktake and Vetting Process	Review National Stocktake Process and level of submissions with reference panel																																																								
	Update processes as required																																																								
	General availability of the catalogue																																																								
Phase 5:	Review of final report																																																								
Key Client Deliverables	Progress Report 1 (To 15 June, 2008)	T,JH	08-024	08-024																																																					
	End of Financial Year Report (to 30 June, 2008)	T,JH	08-029	08-029																																																					
	Progress Report 2 (16 June to 31 October 2008)	T,JH	08-046	08-046																																																					
	Progress Report 3 (1 November 2008 to 27 February 2009)	T,JH	09-011	09-011																																																					
	Progress Report 4 (1 March to 1 June 2009)	T,JH	09-025	09-025																																																					
	Final Report	T,JH	09-027	09-027																																																					
End of Financial Year Report (01 July to 30 June 2009)	T,JH	09-029	09-029																																																						

APPENDIX 3: EDUCATION CATALOGUE PROTOTYPE

Education Asset Submission - Windows Internet Explorer

N:\DOHA1237 Prevocational Education Catalogue\530 Client Billing and Reporting\Final Report\Site demo\form.html

File Edit View Favorites Tools Help

Featured Events: The Paris ... W La Bayadère - Wikipedia, the... Education Asset Submission

Confederation of Postgraduate Medical Education Councils

Australian Curriculum Framework for Junior Doctors
National Education Catalogue

Search Catalogue
Including Advanced and Framework searching

Education Asset Submission

Description of the education asset | Education placement within the ACFJD | Quality & Evidence Underpinning the Education | Additional description and contact details

Step 1: Description of the education asset

Please provide a description for your education asset for each of the following areas:

Full title of the asset

Short Title

Description

Length

Up to 30 mins

Up to 1 hour

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APPENDIX 4: META-DATA STANDARD

Education Catalogue Metadata For Completion by Education Provider

To submit your educational course / kit for inclusion into the post graduate year 1 and 2 education catalogue for junior doctors, please complete each of the following steps.

Step 1: Description of the education educational course / kit:

You will be asked to provide descriptive information about your course / kit, including key information such as:

- the title of the course / kit,
- a brief description,
- key words describing the course / kit content
- the learning goals,
- length of the course (or learning commitment time required)
- target user (junior doctor / medical director)
- description of the format of the course / kit
- the delivery method

Step 2: Education placement within the Australian Curriculum Framework for Junior Doctors (ACFJD)

You will be asked to categorise your course / kit within the context of the ACFJD. In this step you will need to ensure that your course / kit aligns with the competency outcomes as described within the curriculum.

Step 3: Quality and Evidence Underpinning the Education

You will be asked to self-evaluate your course / kit from a quality standpoint in terms of its educational quality, evidence base and external endorsement. You will be asked to assess the education's:

- educational standard,
- levels of evidence underpinning the education,
- evaluations undertaken,
- suitability for prevocational doctors

You will also be asked to outline:

- any attributions
- the date of last content review
- any external accreditation awarded, and;
- any sponsorship or funding of the programme

Step 4: Additional Information and contact details

In this step you will be asked to provide some further details describing your course / kit, such as:

- a statement about any financial interest
- whether there is a purchase fee for accessing the course / kit

You will also need to provide contact details for:

- the contact person for queries on accessing the course / kit
- organization details

APPENDIX 4: META-DATA STANDARD

Step 1: Description of the educational course / kit:

Please provide a description for your educational course / kit for each of the following areas:

	Data field type	Check box or pull down menu content	Expansion	Description Field	Rule
Title of the Education Course / Kit	Open text			This is the full name of the course / kit	Mandatory for submission
Short title	Open text			This is an abbreviated course title (no more than 'x' characters)	Mandatory for submission
Course / Kit Description	Open text – allow room for aprox. 200 words			This should be a brief paragraph that provides an overarching description of the course / kit, including: - the target audience - how the course / kit is delivered - the type of content that is covered.	Allow 500 characters, non-mandatory (alert warning only)
Keywords:	Open text – 4 short fields			Enter 4 Key search words that define the course / kit	Autocomplete words used prior, Mandatory field for submission
Learning Goals: Please list the student learning objectives	Open text – 5 separate one line fields only			Learning goals are the outcomes that a participant is aiming to achieve in completing this course / kit. The learning goals are an explicit component of the course / kit and should be outlined to participants prior to them undertaking the education.	Mandatory field for submission
Learning Experience Time:	Pull down menu	<ul style="list-style-type: none"> • Up to 30 minutes • Up to 1 hour • Up to 2 hours • Up to 4 hours • Up to 8 hours • More than 8 hours 		This describes the length of time that a participant should expect to commit to completing this course / kit (this refers to total time committed,	Mandatory field for submission

APPENDIX 4: META-DATA STANDARD

				whether this occurs in one sitting or over several shorter sittings)	
Target User	Radio box	<ul style="list-style-type: none"> • Prevocational Doctor • Clinical trainer / supervisor / facilitator 		Who is the main recipient of this course / kit? Has it been designed for a prevocational doctor, or as a tool to be used by a clinical educator / course facilitator to teach doctors?	Mandatory field for submission
Teaching and Learning Modality	Tick box	<ul style="list-style-type: none"> • Self-directed learning kit • Course / workshop • Simulation training • Blended learning programme • Educator's kit • Assessment instrument • Other format 	<ul style="list-style-type: none"> • Online • Face to face • Please specify 	In what modality is the course / kit presented? More than 1 option can be selected if there is more than one modality available.	Mandatory field for submission
Format and Access	Tick box	<ul style="list-style-type: none"> • Online Enrollment • Downloadable kit • Event Enrollment (contact provider for details) • Print kit available from the provider • CD/DVD available from the provider • Other delivery method 	<ul style="list-style-type: none"> • URL • URL • Please specify 	How is the course / kit accessed? If available online, please enter the appropriate URL. Contact information will be requested in step 4. More than 1 option can be selected if there is more than one delivery option available.	Mandatory field for submission

APPENDIX 4: META-DATA STANDARD

Step 2: Education placement within the Australian Curriculum Framework for Junior Doctors (ACFJD)

Please select the areas of the ACFJD to which your educational course / kit meets the curriculum's learning outcomes.

Mapping matrix format

<http://www.cpmec.org.au/curriculum/index.cfm>

APPENDIX 4: META-DATA STANDARD

Step 3: Quality and Evidence Underpinning the Education

Please provide a self-evaluation of your educational course / kit from a quality standpoint in each of the areas outlined below.

	Data field type	Check box or pull down menu	Expansion	Description	Rules
Educational standard	Radio box	<ul style="list-style-type: none"> • A formally accredited educational institution was involved in the design. • One or more trained educators were involved in the design • Educational principles were incorporated into the design • None of the above 		The education standard describes the educational design of the course / kit in terms of its level of efficacy as an educational tool (i.e. development based on proven effective educational methodology). This field does not consider the quality or relevance of the content.	<p>Mandatory for submission</p> <p>If 'none of the above' was selected, the metadata summary should read 'This education was not designed by trained educators'</p>
Evidence Base	Tick box	<ul style="list-style-type: none"> • Evidence based guidelines • Literature review • Consensus by experts • Subject matter expert • None of the above 		Describe the level of evidence that underpins the content of the course / kit.	<p>Mandatory for submission</p> <p>If 'none of the above' was selected, the metadata summary should read 'The content of this course / kit is not evidence based'</p>
Evaluation:	Pull down menu	<ul style="list-style-type: none"> • External evaluation completed and results are available • Internal evaluation completed and results are available • Formal evaluation is in progress 		Has any evaluation on the course / kit been completed either internally or by an independent body?	Mandatory for submission

APPENDIX 4: META-DATA STANDARD

		<ul style="list-style-type: none"> Formal evaluation has not been undertaken 			
Suitability	Radio box	<ul style="list-style-type: none"> Designed specifically for prevocational doctors Suitable for prevocational doctors Of relevance to prevocational doctors 		How suitable is the course / kit for prevocational (post graduate year 1 and 2 doctors).	Mandatory for submission
Attribution	Tick box with expansion if 'yes'	<ul style="list-style-type: none"> Yes – Organisation Yes – Author/s No 	<ul style="list-style-type: none"> If yes; please specify If yes; please specify 	List any organization or individual that the creation of this course / kit is attributed to	Non mandatory (alert warning only)
Content Last update:	Date field			This is the date that the education content was last reviewed and updated	Mandatory field for submission
Accreditation	Check box with expansion	<ul style="list-style-type: none"> University Medical Specialist College Post Graduate Medical Council 	<ul style="list-style-type: none"> Please specify (drop list) ACEM ACD ACPM ACRRM AFOM AFPHM AFRM ANZCA JFICM RACGP RACMA RACP RACS RANZCO RANZCO G RANZCP RANZCR RCPA Please specify 	List any external body, including universities, colleges or other organization that has accredited this course / kit	Non-mandatory (alert warning only)

APPENDIX 4: META-DATA STANDARD

		• Other	• Please specify		
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Step 4: Additional description and contact details

Please provide additional description and contact details in each of the areas below.

	Data field type	Check box or pull down menu	Expansion	Description	Rules
Fees and Licenses	Radio box	<ul style="list-style-type: none"> • Free, no permission to use required • Free, but licence arrangements apply • Available for purchase • Other 		Please outline any contractual requirements for someone to access this course / kit	
Public Contact Person	Free text fields	<ul style="list-style-type: none"> • Name • Position • Organisation • Phone • Email • Fax • Address • Website 		This is the person or department who will be contacted by those seeking access to this course / kit, or with queries relating to the course content. These details will be made public within the catalogue.	
Organisation Details: Please provide organization details should you need to be contacted.	Free text fields	<ul style="list-style-type: none"> • Organisation Name • General Enquiry Number • General Email Address • General Fax Number • Postal Address • Website 		This is the organization who owns or has permission to supply this course / kit.	

Disclosure of Financial Interest	Open text – 200 characters allowed			For this course / kit to appear in the public catalogue, you are required to provide a statement disclosing any financial interest in the course / kit. You are required to declare the source of any financial or other support, and	Mandatory for public catalogue Alert warning
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APPENDIX 4: META-DATA STANDARD

				any financial or professional relationships which may pose a competing interest. Please describe the role, if any, of the supporting source(s) in education design, content development and in the writing of the education. Please also state whether the supporting source(s) controlled or influenced the decision to submit the course / kit for publication. If the supporting source(s) had no such involvement, this should be stated.	
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| <ol style="list-style-type: none">1. Submit Application - button2. Summary of responses on screen (with mandatory fields highlighted and alert warnings on some other fields as specified)3. Confirm Submission - button |
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